

DISP:	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>Danice</i>	<i>12</i>	<i>10/11/01</i>
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>CH</i>	<i>1119</i>	<i>11-09-01</i>
RESPONSE FORMALITY REVIEW			

INDEX OF CLAIMS

✓ Rejected
 = Allowed
 — (Through numeral).... Canceled
 ÷ Restricted

N Non-elected
 I Interference
 A Appeal
 0 Objected

Claim	Date
Final	
Original	
1	✓
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3	✓
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Claim	Date
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If more than 150 claims or 10 actions
staple additional sheet here

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